

Financial Policy

Thank you for choosing **GYN Womens Centre of Lakewood Ranch** for your healthcare needs. In order for us to provide you with the best possible service, please read our financial policy listed below.

If at any time you have questions or would like assistance, please contact our Billing Department at (941) 907-3008 ext. 306.

Registration Form:

We require complete, accurate and up-to-date information on your registration form in order to bill your insurance company. We will ask you to update this form annually or when changes need to be made (address, coverage, phone number, name, etc.) If we do not have current phone numbers we will not be able to contact you in the event of any schedule changes. Thank you in advance for your cooperation and patience.

Insurance Cards:

New patients as well as established patients must supply us with a current copy of your insurance card. If you don't have a card and prior arrangements haven't been made, payment in full is expected at the time of service. You will be asked to show the receptionist your current insurance card annually. This allows us to assist you in collecting the benefits from your insurance company to which you are entitled.

Lab Charges:

It is important that you verify with your insurance company your benefits before your visit or if your insurance changes, where your labs are to be sent. You will be responsible for any lab charges that were sent out of network.

Insurance Policies:

For insurance companies that we participate with:

We are pleased to bill your insurance company for you. If your insurance company requires you to make a co-payment, co-insurance and/or deductible we require this payment at the time of service. For your convenience we accept Visa, Mastercard, Discover, AMEX, and Care Credit. You are also responsible for any amounts the insurance plan deems not covered, up to the entire amount. Health plan coverage varies significantly by carrier, by employer, and/or by contract. We cannot know the benefits and exclusions of each patient's health plan. It is the patient's responsibility to know and understand her plan coverage benefits.

If we do not hear from your insurance company:

If we have not received payment or rejection from your insurance company in a timely manner, we will transfer the balance to your responsibility. We request your assistance in following up with your insurance company to resolve any non-payment issue.

For insurance companies that **we do not** participate with:

You are responsible for payment of charges at the time of service. We can assist you by submitting a claim for you. This does not guarantee payment from the insurance company.

Medicare Patients:

Medicare and Medicare replacement insurance plans require us to have you sign an Advanced Beneficiary Form. This form is for care that might not be covered by Medicare. This will be supplied to you at your appointment.

Self Pay:

If you do not have insurance or are seeking care outside of your insurance plan benefits, payment in full is requested at the time of service. Our staff will gladly give you an estimate of your visit prior to your appointment. If you are interested in making arrangements, please contact our Billing Office at (941)907-3008 x 306.

Disability, FMLA and Other Forms:

We realize that special forms are sometimes necessary to provide documentation of medical conditions. Completing forms is time consuming and generally falls outside the contractual relationship between you and your insurance company. We will be happy to complete the forms for our patients. The fee for this is \$25.00 per form. Please allow appropriate time for completion of up to a 2 week maximum.

Medical Records:

Medical records can be released upon your completion of a Records Release form. The fee for copying records is \$1.00 per page up to 25 pages then \$0.25 per page over 25 pages. There is no fee if they are released to another medical provider. Payment must be received prior to the release of records.

Returned Checks:

A fee of \$35.00 for checks returned to us for insufficient funds will be charged to your account. Future services will require payment by cash, money order, or a credit card for your payment obligations.

Statements:

You will receive a statement once per month if there is an outstanding balance. The billing statement will itemize your services as well as any payments, deductibles or co-insurance amounts applied by your carrier. If you do not understand your statement or have additional questions regarding your balance, please contact our billing office at (941)907-3008 ext. 306. for clarification. If your insurance delays processing your claim incorrectly, you will have to contact them directly. If you cannot meet your financial obligations, please call our billing office. Every effort will be made to work out an acceptable payment plan. You will continue to receive a statement until all of your charges and all dates of service are paid in full.

Past Due Accounts:

In the event that a balance becomes past due, the account will be considered delinquent. These accounts are subject to further collection action, including placement with a collection agency.

Refunds:

In some cases our office might owe you a refund. Refunds are issued from our corporate office in the form of a check if you paid by a check or cash. Otherwise, your refund will show on the debit or credit card you paid with. Please note that refunds are not given until all outstanding charges are cleared.

